


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) 21764L-001100US	
Application Number 10/550,157		Filed September 20, 2005	
For SYSTEM AND METHOD FOR THE DERIVATION OF HUMAN GAIT CHARACTERISTICS AND DETECTING FALLS PASSIVELY FROM FLOOR VIBRATIONS			
Art Unit 3736		Examiner John PANI	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One mon th (37 CFR 1.17(a)(1))	\$130	\$65	\$ 65
<input type="checkbox"/> T wo months (37 CFR 1.17(a)(2))	\$490	\$245	\$
<input type="checkbox"/> Three mont hs (37 CFR 1.17(a)(3))	\$1110	\$555	\$
<input type="checkbox"/> Four m onths (37 CFR 1.17(a)(4))	\$1730	\$865	\$
<input type="checkbox"/> Five mo nths (37 CFR 1.17(a)(5))	\$2350	\$1175	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>20-1430</u> .			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>58,182</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 Signature		April 17, 2009 Date	
James E. Golladay, Reg. No. 58,182 Typed or printed name		(202) 481-9900 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of _____ forms are submitted.			